

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Handwritten initials]</i>		06/28/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Handwritten initials]</i>	JL-9/16	07-18-01
RESPONSE FORMALITY REVIEW	<i>[Handwritten initials]</i>	1030	10-29-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5-31-00
2	✓	✓	10-24-00
3	✓	✓	4-16-01
4	✓	✓	10-1-01
5	✓	✓	
6	✓	✓	
7	✓	✓	
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If more than 150 claims or 10 actions  
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*[Handwritten note]*  
10/24/01